



Confined Animal Feeding Operation Request for Approval Voidance

To submit a request to have your approval voided and removed from the Confined Feeding Approval system, this form must be completed, signed, dated, and returned to:

Jerome Rud, Chief
Solid Waste Permits Section
Office of Land Quality
Indiana Department of Environmental Management
100 North Senate Avenue
P.O. Box 6015
Indianapolis, Indiana 46206-6015

Approval Number, AW- _____ (or) Log Number, _____
 Date of application approval (or most recent approval update): _____
 Owner Name (Name to which most recent approval was issued): _____
 Mailing address of owner: _____
 Telephone Number (with area code): _____
 Name of Operation (if applicable): _____
 Location of Operation (nearest crossroads or mailing address): _____
 County of Operation: _____

If any of the above information is unknown, contact your Local County Extension Agent or IDEM at 317/232-3111.

I am requesting my approval be voided because (check all that apply):

- " My operation currently does not meet the definition of a confined feeding operation under the statute IC 13-11-2-40(1) and (3) which states:
 "Confined feeding operation", for purposes of IC 13-18-10, means:
 - (1) any confined feeding of:
 - (A) at least three hundred (300) cattle;
 - (B) at least six hundred (600) swine or sheep; and
 - (C) at least thirty thousand (30,000) fowl; or
 - (3) any animal feeding operation that is causing a violation of:
 - (A) water pollution control laws;
 - (B) any rules of the water pollution control board; or
 - (C) IC 13-18-10.
- " I no longer confine livestock at the above referenced facility.
- " I have removed all manure stored in pits and/or lagoons at the above referenced facility.

By submitting this request for voidance I understand that my request will be reviewed by IDEM staff and an Agricultural Waste Inspector will visit my farm to confirm that manure has been properly removed from any lagoons, pits, or tanks. If a Voidance is granted, I understand that I will be removed from the list of approved operations and will not have to meet the requirements of my approval or submit a manure management plan to IDEM once every five (5) years. If I intend at some point in the future to increase the size of my operation above the animal numbers required in IC 13-18-10 I must seek a new approval prior to increasing the size of the operation.

By signing this form I attest that the information provided above is true and accurate.

Signature

Date